

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 4-14-03.

## I. DISPUTE

Whether there should be **additional** reimbursement for ambulance services and supplies coded A0368, A0390, A0382, A0422, and A0382.

## II. FINDINGS

1. The requestor billed \$532.00 for the disputed services.
2. The respondent paid \$223.47 based upon “M – Reduced to Fair and Reasonable; and G - unbundling.”
3. Total amount in dispute is \$308.53.
4. Section 413.011(b) of the Act states, “Guidelines for medical services must be fair and reasonable and designed to ensure the quality of medical care and to achieve effective medical cost control. The guidelines may not provide for payment of a fee in excess of the fee charged for similar treatment of an injured individual of an equivalent standard of living and paid by that individual or by someone acting on that individual’s behalf. The commission shall consider the increased security of payment afforded by this subtitle in establishing the fee guidelines.”
5. The requestor provided the following redacted EOBs to support position that amount billed complies with Section 413.011(b) of the Act.

Insurance Carrier	Service Codes	Amount Billed	Amount Paid	Percentage
	A0368, A0390 A0382	\$1750.00	\$1308.55	76%
	A0370, A0390, A0422, A0382, 93005, J2270, A0398	\$541.53	\$541.53	100%
	93005, A0390, A0370, A0382, A0422	\$595.00	\$595.00	100%
	A0370, A0390, A0382, 93005, A0422	\$1161.00	\$879.61	76%
	A0370, A0390, A0382, 93005, A0422	\$629.00	\$471.52	75%

	A0364, A0390, A0382	\$583.00	\$583.00	100%
	A0370, A0390, A0382	\$455.00	\$455.00	100%
	A0368, A0390, A0382	\$474.00	\$474.00	100%
TOTAL				Sum of % = 727 / 8 carriers = 91%

The requestor provided redacted EOBs that support payment of 75% to 100%. The rate of payment was calculated by the sum of the percentages and then divided by 8 that resulted in an average of 91%.

### III. RATIONALE

The insurance carrier denied reimbursement of A0382 – head bed and A0382 – gloves as global. These supplies were not global to any other supplies or service rendered on this date; therefore, payment is recommended.

The requestor submitted redacted EOBs that show payment was made of 91% of amount billed for ambulance services is fair and reasonable. Therefore, 91% of \$532.00 = \$484.12. The difference between amount paid and fair and reasonable amount = \$260.65.

### IV. DECISION

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to additional reimbursement of \$260.65 for ambulance services and supplies. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$260.65** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 06th day of February 2004.

Elizabeth Pickle  
Medical Dispute Resolution Officer  
Medical Review Division